

SECRET

REQUEST FOR APPROVAL OR INVESTIGATIVE ACTION (Always Handcarry 1 copy of this form)		14 Sept 62	
TO: <input checked="" type="checkbox"/> CI/Operational Approval and Support Division	FROM: C. Bustos-Videla	380003	
<input type="checkbox"/> Security Support Division/Office of Security		WH/3/Mexico	
SUBJECT: (True name) Manuel CASVILLO Alonso	PROJECT		
CRYPTONYM, PSEUDONYM, AKA OR ALIASES	CI OR FILE NO.	C- 102-500	
LICHANT-1	RI 201 FILE NO.	201-331599	
		SO FILE NO.	
1. TYPE ACTION REQUESTED			
<input checked="" type="checkbox"/> PROVISIONAL OPERATIONAL APPROVAL	<input type="checkbox"/> PROVISIONAL PROPRIETARY APPROVAL		
<input checked="" type="checkbox"/> OPERATIONAL APPROVAL	<input type="checkbox"/> PROPRIETARY APPROVAL		
<input type="checkbox"/> PROVISIONAL COVERT SECURITY APPROVAL	<input type="checkbox"/> COVERT NAME CHECK		
<input type="checkbox"/> COVERT SECURITY APPROVAL	<input type="checkbox"/> SPECIAL INQUIRY (SO field investigation)		
<input type="checkbox"/> COVERT SECURITY APPROVAL FOR LIAISON WITH U.S. OFFICIALS			
2. SPECIFIC AREA OF USE			
Mexico City			
3. FULL DETAILS OF USE CA			
to run a small unit to do research on papers on communist infiltration in student circles at the Mexican University			
4. INVESTIGATION AND COVER			
		YES	NO
A. U.S. GOVERNMENT INTEREST MAY BE SHOWN DURING INVESTIGATION?			<input checked="" type="checkbox"/>
B. CIA INTEREST MAY BE SHOWN DURING INVESTIGATION?			<input checked="" type="checkbox"/>
C. IS SUBJECT AWARE OF U.S. GOVERNMENT INTEREST IN HIM?			<input checked="" type="checkbox"/>
D. IS SUBJECT AWARE OF CIA INTEREST IN HIM?			<input checked="" type="checkbox"/>
E. INDICATE ANY LIMITATIONS ON COVERAGE IN THE INVESTIGATION OF SUBJECT.			
F. SUGGEST "COVER PRETEXT" TO BE USED IN CONDUCTING PERSONAL INVESTIGATION OF SUBJECT.			
IF NO INVESTIGATION OUTSIDE CIA, EXPLAIN FULLY			
5. PRO AND GREEN LIST STATUS			
<input checked="" type="checkbox"/> PRO I, OR EQUIVALENT, IN (2) COPIES ATTACHED	<input type="checkbox"/> PRO II WILL BE FORWARDED		
<input checked="" type="checkbox"/> PRO II, OR EQUIVALENT, IN (1) COPY ATTACHED	<input checked="" type="checkbox"/> GREEN LIST ATTACHED, NO: 125250		
3. RI TRACES			
<input checked="" type="checkbox"/> NO RECORD	<input type="checkbox"/> WILL FORWARD	<input type="checkbox"/> NON-DEROGATORY	<input type="checkbox"/> DEROGATORY ATTACHED
7. DIVISION TRACES			
<input checked="" type="checkbox"/> NO RECORD	<input type="checkbox"/> WILL FORWARD	<input type="checkbox"/> NON-DEROGATORY	<input type="checkbox"/> DEROGATORY ATTACHED
8. FIELD TRACES			
<input checked="" type="checkbox"/> NO RECORD	<input type="checkbox"/> WILL FORWARD		
<input type="checkbox"/> NO DEROGATORY INFO.	<input type="checkbox"/> DEROGATORY ATTACHED		
LIST SOURCES CHECKED			
NOT INITIATED (Explanation):			
SIGNATURE OF CASE OFFICER	EXTENSION	SIGNATURE OF BRANCH CHIEF	
C. Bustos	626	N. J. Solman, C/MH/3	

FORM 772 USE PREVIOUS EDITIONS.

SECRET

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